

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of:

MILLS, Matthew

Serial Number: **Filed herewith**

Examiner: **Not yet known**

Filed: **Filed herewith**

Art Unit: **Not yet known**

For: **THERMAL AID**

MAIL STOP PATENT APPLICATION

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT

Dear Sir or Madam:

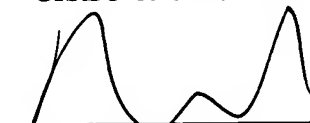
In accordance with 37 C.F.R. §§ 1.56, 1.97, and 1.98, disclosure is made of the following known related art listed in the accompanying Information Disclosure Citation, Form PTO-1449.

Applicant hereby cites the patents and/or publications on the attached form for consideration by the Patent and Trademark Office in regard to the claimed invention. By this notice, Applicant requests that the Patent and Trademark Office make of record the documents listed. No representation is made that more pertinent material is not available or should not be considered by the Examiner. It is expected that the Patent and Trademark Office will independently conduct a complete search of appropriate prior art. Furthermore, no admission is being made that these documents are prior art, and Applicant reserves the right to challenge any such conclusion.

Should there be any remaining or further questions, the Examiner is requested to please contact the undersigned directly. It is not believed that any additional fees are due. However, in the event additional fees are due, the Examiner is hereby authorized to charge Applicant's Attorney's Deposit Account No. 03-2030.

Respectfully submitted,

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Date: February ^{9th}____, 2004

Enclosure
Information Disclosure Statement

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| Form PTO-1449 (Rev. 8-83) | | U.S. Department of Commerce Patent and Trademark Office | | Atty. Docket No. 04-13161 | | Serial No. Filed herewith | |
| INFORMATION DISCLOSURE CITATION (Use several sheets if necessary) | | | | Applicant MILLS, Matthew | | | |
| | | | | Filing Date Filed herewith | | Group Not yet assigned | |
| U.S. PATENT DOCUMENTS | | | | | | | |
| XMR INIT* | | DOCUMENT NUMBER | DATE | NAME | CLASS | SUBCLASS | FILING DATE |
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| Examiner: | | | | Date Considered: | | | |

* Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.